

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>	✓		8-29-01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
1	10/22/01
2	10/22/01
3	10/22/01
4	✓ 10/22/01
5	✓ 10/22/01
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9	✓ 10/22/01
10	✓ 10/22/01
11	✓ 10/22/01
12	✓ 10/22/01
13	✓ 10/22/01
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15	✓ 10/22/01
16	✓ 10/22/01
17	✓ 10/22/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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